



Letter from the Co-Presidents



Dear PCFINE Community,

I first met Justin in 1976, when he was a Psychology Intern and I was a Social Work Student at what was then Beth Israel Hospital. He and I have remained friends ever since, with spaces in between. Here we are again, collaborating on behalf of PCFINE. At the turn of this century, I took notice of some classes being offered on work with couples and I signed up. I took classes with Gerry Stechler and David Berkowitz and, when an actual curriculum was offered by this organization called PCFINE, I signed up to be in the first year, 2002. I had worked with couples before, when I headed a sex education and sex therapy program in Washington, D.C. David Scharff, M.D., was our clinical director. But it had been years since those early beginnings and I was hungry for more learning and for a local group of colleagues in the endeavor. And I found both in PCFINE. I have enjoyed every moment of my association, even including Carolyn's arm twisting to become more formally involved.

In my experience, PCFINE is unique in its seriousness of purpose, its lack of individual egotism, its marvelous sense of humor, its genuine supportiveness in the pursuit of understanding the complexities of couples work. I have the greatest respect for the hard work of the faculty, the consultation group leaders, and the committees. I am so grateful to Arnie for keeping Justin organized until I

could help out. Justin is a marvelous force of nature and a pure pleasure to work with. So it is with humility and a desire to give back for all I've been given that I agreed to be Co-President with Justin for an overlap year before the estimable Mary Kiely joins me in the fall of 2015.

I loved Arnie's warm and thorough farewell letter in the fall, 2014 issue of *The Connection*. I will attempt to mention only those PCFINE events not covered there.

- 1) This past fall saw the start of the 12th Year I of the Training Curriculum. More applicants than could be accepted applied for the program. A lively, experienced, diverse class of seven women and five men began their studies with Coordinators Justin and Mary, followed by Joe Shay and Linda Camlin this spring.
- 2) On October 26, 2014, The Brunch Committee hosted "High, Low, Dosey Doe: Working with Various High and Low Affect Pairings in Couple Therapy". The Presenter was Rachel Barbanel-Fried, Psy.D. and the discussant was Jennifer Stone, Ph.D. You will find a review of this lively meeting elsewhere in the newsletter.
- 3) A fun and delicious faculty appreciation dinner was held on January 25, 2015, hosted, once again by Joe Shay's friends at the Rangzen restaurant in Cambridge. As usual, Joe presented a provocative and engaging series of film clips and questions for the assembled to discuss.
- 4) The Ongoing Learning Committee is stepping into a prominent position for the future of PCFINE learning,

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providing consultation and support for those wishing to offer a subject of interest, be it one session or a short course. Already, Carolyn has taught a four week course on Grown Children and Their Families of Origin and Steve Krugman has taught a four week course on Attachment Theory in Work with Couples. Eleanor Counselman will offer a half-day workshop demonstrating a model of Affect-Based Case Consultation. Keep posted for more exciting offerings.

5) Justin enlisted the expertise of Eric Albert and Joe DeAngelis, who worked hard and with great success to offer the community two new directory formats. We hope everyone is enjoying the greater ease and utility of the sites. We are

PCFINE Newsletter

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The goals of this newsletter are two-fold:

- To promote the objectives of the Psychoanalytic Couple and Family Institute of New England.
- To be a forum for the exchange of ideas and information among members.

PCFINE Board

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PCFINE Mission Statement

The Psychoanalytic Couple and Family Institute of New England (PCFINE) is a nonprofit organization offering postgraduate professional training, public education and consultation to community agencies.

PCFINE was created and is sustained by mental health professionals who are committed to an integrated conceptual model that includes psychoanalytic ways of understanding unconscious functioning in couples and families and systemic insights into the organization and structure of interpersonal conflict.

The Psychoanalytic Couple and Family Institute of New England endeavors to:

- Train licensed independent clinicians in psychoanalytic couple and family therapy,
- Sponsor public outreach and education in areas of significance to couples and families, and
- Offer professional consultation to community-based agencies.

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Letter from the Co-Editors



The Fall 2015 issue of this newsletter was of record length. This is a testimony to all that has been happening in PCFINE, as the organization continues its energetic pace. We felt it important to report on all the activities even though that stretched the newsletter to 17 pages! As a result we made more mistakes than usual and apologize to those affected. A corrections box is found in this newsletter.

This issue inaugurates our cartoon caption contest. Thanks to our ever-creative David Goldfinger, we will have a cartoon in each issue awaiting your captions. Three winning entries will be published in the next issue.

PCFINE's energetic pace continues with new leadership in various positions. We welcome Sally Bowie into her new role as Co-President. Her first Co-Presidents' Letter is found in this issue. Mary Kiely is Co-President-Elect and will succeed Justin Newmark next year. Magdalena Fosse is now Treasurer and David Goldfinger is Secretary. Betsy Gaskill is the student representative to the board. We are grateful to our immediate Past Co-President Arnie Cohen for his hard work on behalf of PCFINE.

PCFINE has a growing membership of training program alumnae and people

interested in couple therapy, and the organization is responding with its usual creativity. The new Ongoing Learning program, now up and running, is a real gift to the membership. Three cheers to its developers!

This is your newsletter. It exists because PCFINE members write for it. Please don't be shy...if you have an idea for an article, an interview, or want to report about a PCFINE event, please contact Dan or me. This is a good place to try out an article that you might want to develop further for journal submission.

What can we say about this miserable winter? On one of several "snow days" at home, I composed the following doggerel. I share it for your amusement.

Winter 2015

I don't ski and I don't skate
This long New England
winter I really hate
Ice dams make me crazy
I want to be lazy
I'm thinking a warmer state
is my fate.

But I'm too young for Florida;
my hair isn't white.
California's too crunchy;
it doesn't feel right.
So I guess I'll stay here
And wait until Spring.
And when the snow's melted
Oh, what joy that will bring!

Eleanor (and Dan)

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&

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Co-Editors, PCFINE CONNECTION



Errata

In the Fall issue Diane Englund's name was spelled wrong in the photo captions. It should read "Diane," not "Dian."

And Jeff Thomas was incorrectly listed as John Thomas.

What Now?

The “What Now?” column is a regular feature in the PCFINE Connection. Clinicians in the PCFINE community respond to complex clinical questions about couple and family therapy. The cases presented are based on a variety of issues submitted by members and disguised and/or fictionalized to preserve the confidentiality of clients. If you have a question you would like considered for this column—or if you would like to become a respondent—please contact Randy Blume at randy@tashmoo.com. Case vignettes and responses range from 500-700 words.

Dear What Now?

I'm feeling completely stuck with a married lesbian couple I've been seeing for almost a year.

The presenting problem was that Clio, 35, wanted a baby and Rachel, 49, did not. The couple had met two years before at a Harvard Business School Alumni event. Rachel had been running a start-up software company, and Clio had been working for a consulting firm. When they decided to get married, Rachel sold her company for enough money to pay for a spectacular June wedding followed by an extended honeymoon of world travel. Clio, who had hated both her job and “the whole MBA culture,” was all for this plan until, six weeks into their six-month trip, she was robbed in Bangkok, broke her arm in Auckland, and got dysentery in Beijing. At that point, Clio said she was done traveling forever. The couple returned to Boston and bought a house in Cambridge. Rachel started a new company and was frequently out of town meeting with potential partners and investors. Clio decided not to return to work right away. She took over the household responsibilities and told Rachel she wanted to have a baby.

When the couple arrived in my office, they were both angry and resentful. There was no sex, little affection, few

shared activities, and limited time together. Their “life partner agreement,” according to Rachel, was that they were NOT going to have children. They were going to have fulfilling careers, exciting travel, and lots of friends. Now Clio refused to travel again, had given up her career to become “Suzy Homemaker,” and spent her days with her thirty-something friends — all of whom had babies and/or toddlers, no longer worked, and had made Clio into “a diaper-talking zombie.”

“...every week is the same: Rachel does not want a baby and Clio does...”

Rachel, the only child of her mother and a “bacchanalian misadventure” (she did not know her biological father), had been physically and sexually abused by the man her mother married when she was ten. When she had confided in her mother at puberty (out of fear she would get pregnant), she had been told that her stepfather “held the purse strings” and that if she ever wanted to go to college she had better be “cooperative.” Rachel was “cooperative” — right up until college graduation, at which point she moved away, changed her last name, and hasn't spoken to her family since. She considers herself “damaged” by her history and was emphatic about not wanting “to bring that (damage) into a child's life” by becoming a parent. She was angry that Clio had “broken” their agreement about a childless lifestyle and resentful that Clio was forcing her to “either choose something I don't at all want or risk losing the love of my life.”

Clio had understood the “agreement” to mean that they were not going to have children “right away.” While she took responsibility for “changing the agreement in terms of travel,” she said she hadn't understood that Rachel

NEVER wanted children. She'd always thought that once they settled down in their own house they would start a family. Rachel made plenty of money, and Clio had some money of her own saved up, so there was no reason to work at a career she detested. She would provide a beautiful and efficient household and raise their children while Rachel did what she loved — started companies. As the youngest of five whose parents still lived in the house where she'd grown up, Clio considered herself to have had “a stable and functional childhood,” though she felt that there hadn't been quite enough attention to go around. She had “done the career thing,” and now she wanted to lavish attention on the woman she loved and “a child or two.” If she didn't get to raise a child, she would always feel “empty and consumed with regret.” She was angry and confused that Rachel wouldn't give her “this one thing that matters the most to me” and resentful that Rachel was “forcing” her to “choose between my marriage and motherhood.”

The couple responded well to therapy — or so I thought. They spoke freely about their histories, feelings, hopes, and dreams. They listened and reflected with genuine empathy. Their communication improved; they made a conscious effort to spend time together; they became more affectionate (if not necessarily more sexual). They are intelligent, pleasant, and motivated, and I enjoy working with them. But every week is the same: Rachel does not want a baby and Clio does, and each session becomes an exercise in futility — which partner can formulate a better intellectual argument for her position. I thought maybe it was enough that they have kept coming, but over the last few weeks they have started to complain that they are “still at an impasse.” I agree, and I feel responsible for finding a way to
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What Now?

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change the pattern in which they (and the therapy) are stuck. But I've tried everything! Now what, What Now?

Sincerely,

Stuck

Dear Stuck,

I understand why you are feeling stuck as Rachel and Clio's therapist if you believe your task is to solve their dilemma around having children. One thing that strikes me with this couple is that, to each other, Rachel and Clio are like *foreign lands*—describable from the outside but not knowable from the inside. I found myself thinking about the European Union: for what reasons do these disparate countries federate, and what challenges to their autonomy does that entail? Why doesn't the "genuine" affect in this couple therapy include more sadness around the hopeless bind in which each feels so stuck and, possibly, less anger over the terms of their marital contract? I see a struggle that is a zero-sum game being enacted: one will win what is most important to her and one will lose all. I ask: Where does the other figure in the future that each imagines? Do their visions of the future have any place for the real partners to inhabit? Or, are the partners to play the roles that each assigns the other?

There are suggestions that these women have an unfinished understanding of intimacy. They were married rather quickly in a fairy tale manner followed by a honeymoon which ended badly. Since returning, they spend little time together. Each argues that the marriage contract binds her partner to owe her what she believes was promised—and therein lies the resentment. Are they mistakenly under the impression that marriage is simply a vehicle for their personal dreams to come true? While a relationship can satisfy some personal dreams and be useful in managing the demands of one's own

"internal economy," that is not its primary function. Can they see the psychological functions they are asking this dilemma to hold? Perhaps being childless is necessary to Rachel to keep her from being "used" as she was as a child. Perhaps, for Clio, the white-picket fence will help her avoid some of what feels so dangerous about the "outside" world. But what are the paths to the future for Rachel and Clio, the unit?

I'd introduce the notion of "relationship" as a living entity unto itself into which two people bring and sustain life. Which needs are the relationship's? What are its hopes and its fears? How much of a shared federation has even been established yet? Sexual intimacy seems to have waned, of note. I keep in mind that the future of a system is multiple and can neither be predicted nor decreed. It emerges within a relationship; it unfolds, and it surprises. Its "solutions" are more creative than can now be imagined. Rather than engaging in a series of battles with victories and defeats, you might help them see their way to committing to a long-term project around sharing a co-determined future. They can begin by opening a small space to explore the people that they can become in this marriage, as opposed to the well-

"I see a struggle that is a zero-sum game being enacted — one will win what is most important to her and one will lose all."

known people that they actually are. Introduce the idea of difference. In her inner actuality each expects the other to experience her needs as imperative and essential; she has no other choices. As their therapist it is important that you not believe this or

you will have given up on what is possible, on change.

I'd be remiss if I didn't mention that Clio and Rachel seem to be wrestling with different developmental issues corresponding to their perceived stages in life. Rachel's mindset centers around enjoying the fruits of her business labor, such as travel. Clio imagines her future in the context of being a mother and housewife. Each mistakenly thinks she knows where her life *must* go.

The question for the therapist now is how to buy time so that Clio and Rachel can begin to build this novel federation of theirs and experience the surprise (and occasional discomfort), the cost and the boon, of being interdependent. Their futures (including their future selves) are now co-determined and part of a system that is "neither you nor me." Only when the question about starting a family is seen in wider metaphorical terms can there be room for their relationship to develop.

Sincerely

Andrew Compaine, M.D.
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Dear Stuck,

After reading your description of Rachel and Clio's (and your own) impasse, I reflected with some amazement on how, after over twenty-five years as a psychotherapist, I still grow tremendously anxious when faced with such seemingly insoluble "do or die" couple problems: either we have a baby or our newly formed marriage crumbles, and it is up to you, Dr. Phillips, to solve this quandary for us. Perhaps I could have the baby and loan it out to them on an "as needed" basis, my version of providing the required Solomonic solution here. Aware of the improbability of enacting such miracles, I sometimes avoid the core conflicts and then fail to see the

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What Now?

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relational patterns upon which I AM equipped to shed some light and, hence, provide the couple with true help.

You have done a terrific job of helping Rachel and Clio revive some of the attraction that drew them together, thus placing them on better emotional footing to explore their dilemma. Since I hear little about the multi-leveled meanings of their baby impasse, I wonder if you, too, may have been avoiding the core conflict for fear that you cannot provide them with a good solution or, worse, that no good solution exists.

Of course, you cannot solve their dilemma for them, and I would tell them this up front. However, you can help them unpack together the meanings and feelings that have led to their polarization. This is tricky since the manifest conflict—baby or no baby—is, itself, so rife with meanings and intense feelings for each of them that the “meta” developmental, coupling conflict, with its related feelings and meanings, can get lost. Both need to be explored. But, by first articulating for them the overriding, coupling challenge, you may shake them loose from their polarized stances. I would let them know that I believe their crisis has a function, not just in resolving the very complex decision about parenting, but in alerting them to the need to address their feelings and fears related to linking their lives together more generally.

Clio and Rachel are embroiled in the initial developmental crisis of committed coupledness, i.e., how are we going to balance each of our separate needs, wishes and dreams with those of another person’s? They have been on the fast track, rushing headlong through courtship, marriage, a traumatic honeymoon, selling and reconstituting companies, and buying a home—all in less than a year. There would seem little time to breathe, let alone begin the process of building a “we.”

Adding insult to injury, their good intentions have been foiled. They have tried to approach the task of coupling with forethought and planning. No surprise, then, that the derailed “life partner agreement” triggers an even greater sense of betrayal and anxiety about what they have gotten themselves into, activating all of the trepidation—if not terror—they carry from prior attachment experiences.

For Rachel, in particular, I can imagine the question looming is, “Will this be a coupledness where my choice is to either submit ‘cooperatively’ as Clio’s needs and wishes get rammed down my throat, or escape for my life?” For Clio, the anxieties associated with trading

“...I wonder if you, too, may have been avoiding the core conflict for fear that you cannot provide them with a good solution...”

autonomy for union may be somewhat less intense, but the youngest of five children cannot help but carry some fear of having her needs subsumed.

By slowing them down and normalizing this as the first necessary stage in marriage, you may help them more safely express the likely sense of betrayal and anxiety that they actually share. Providing a place to learn about each other’s fears and hopes with respect to whether divergent needs can be appreciated and sometimes met by the other will hopefully reduce the defensive polarization embedded in the “baby impasse.” You might ask them to reflect on any other conflicts they have encountered, what their feelings were, and how they resolved them.

With less polarization, they may better understand all of the feelings and meanings that each brings to the baby question and be able to address it as a team, rather than as enemies. While being a little pregnant is impossible, finding alternative nurturing roles is not.

Helping Rachel and Clio to negotiate an actual time structure for the process may also help. You might ask them to arrive together on an agreed upon date by which they would need to know from the other whether their current position had shifted, and what magnitude of a shift would be needed to remain together. The implications of their significant age difference would likely come to the fore in this sort of negotiation. Having some individual meetings would also help in uncovering areas of potential, hidden ambivalence on either side.

The challenge is building a “we” before even considering a “wee” one.

Best,

Susan Phillips, Ph.D.
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Save the Date!
Sunday, June 14th
Brunch

“The Many Faces of Shame in Couple Treatment.”

Discussant: Jerry Gans
Clinical Case: Steven Krugman
Moderator: Rachel Barbanel-Fried
Location TBA.

“High, Low, Dosey Doe: Working with Various High and Low Affect Pairings in Couple Therapy”

by Helen S. Hwang, Ph.D., MPH
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On October 26, 2014, the PCFINE Brunch Committee introduced Jennifer Stone, Ph.D. and Rachel Barbanel-Fried, Psy.D. whose presentation entitled: “High, Low, Dosey Doe: Working with Various High and Low Affect Pairings in Couple Therapy,” focused on the challenges of working with affect in couples. Just as the goal of a good wine pairing is to make both the food and wine taste better when consumed together; for example, champagne pairing fantastically with anything salty, a Cabernet Sauvignon being fabulous with juicy red meat, or old world wines and dishes being intrinsically good together (Tuscany anyone?), aspects of the “pairing” are obviously “off” in the couples who come to find us. While optimal pairings delight the palette, what are the elements in couple pairing that contribute to, and perhaps even create painful disequilibrium and estrangement? Could it be that differences in how each side of the pair expresses or experiences affect are so significantly different, or so painfully similar, that together they end up clashing intensely, or conversely, becoming so inert as to become flavorless, bland, and dead?

Both presenters “paired” nicely together, with Dr. Stone initially laying forth some theoretical underpinnings of affect and its embodiment in early attachment relationships. She noted that although up to 70% of the interactions between the infant and mother are misattuned, the infant or pair will try to manage the misattunement by actively doing things to establish being “seen.” She drew a parallel to the “demand-withdrawal”

dynamic that is the most prevalent pattern in couples. We often observe the anxious, critical pursuit of the lost or absent one with our couples.

Dr. Stone underscored the necessity of establishing a safe place for the emotionally distant partner to come forth and engage and said that even the tiniest expressions of affect would be helpful for the therapist to note. In doing so, and at the same time setting limits with the “overly emotional one”, the therapist can establish the *optimal level of emotional arousal* in order for each in the pair to be more freely engaged. To take it even further, it is only from this place that another place can be created, the one where thought and self-reflection can occur. I don’t think anyone would argue with that.

“...the therapist can establish the optimal level of emotional arousal in order for each in the pair to be more freely engaged.”

The pairing continued with Dr. Barbanel-Fried fearlessly introducing us to three lively cases, each reflecting a distinct emotional picture. Ironically, as disconnected as Dr. Barbanel-Fried felt in treating the low affect-low affect pair, the room felt quite engaged and curious about “them”, with what seemed to be a striking difference in our experience of the couple. Dr. Stone noted that a therapist’s own constitution plays a part in what can be contained, or not. Not surprisingly, the high affect pairing generated the most heat and energy in the audience—it was as if we were hearing about an especially salacious episode of “Scandal.”

What happens when feelings become so dysregulated that one of the pair has to physically leave the space? One audience member referred to herself as directing “traffic.” It is fair to say that

a tremendous amount of affective activity typically masks a lot of vulnerability. The third pairing, low-affect, high-affect seemed to generate the most warmth from the audience, probably because the high affect side of the pair seemed emotionally accessible, and we could therefore “hear her.” Finally, we also noted the affective temperament of the therapist, and how this may certainly affect what level of affect in our couples we feel most drawn to, or not.

A Dim Light
Ruth C. Chad, Ed.D.
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*Mother, see the birds
in the birches,
wings full
of blue sky light, flecked
with flashes of white;*

*blue jays are lingering
in the leaves,
sun slips
through their feathers
lighting the trees.*

*Her eyes say:
These trees are bare.
The day is dark.*

*She is small,
and knows she could fall.*

*Her coat rests
on bony shoulders,
crooked feet quivering.*

*Where are we going dear? she asks.
It is cold and I am shivering.*

*Just to feel the sun
on your skin,
her daughter whispers.*

*She sees only shadows;
her light is dim.*

Therapists' Use of Their Own Affective Experience in Couples Work

By David Goldfinger, Ph.D.
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Continuing this year's theme of working with affect, the Brunch Committee offered its winter program on March 1st, titled, "Therapists' Use of Their Own Affective Experience in Couples Work," to an audience of twenty-eight PCFINE members and guests. The presenters were Luanne Grossman and Rachel Segall, the moderator was Steve Krugman, and Susan Abelson hosted the event.

Luanne Grossman began by providing a conceptual framework, weaving together elements of neurobiology, attachment theory, and relational psychoanalysis. Quoting Gerald Stechler, Luanne declared that affect is "the heart of the matter." Emotions are at the center of how we feel alive and connected to one another, and how we develop a shared understanding of the world. She proposed that if we want to help a couple in our office, we must be prepared enter their emotional landscape with our whole being, to feel our way into their disconnections and irresolvable impasses. By paying attention to what arises in us, we gather affective information and begin to apprehend the nature of the difficulty.

Luanne recommended that we explore both negative *and* positive affects within the couple's relationship, reminding us that positive affects too can be vulnerable and destabilizing. When we find ourselves caught up in emotional turbulence, she encouraged us to "lend ourselves to the experience," to allow ourselves to become temporarily submerged, lost, or confused, recognizing that something important is happening that we may only eventually come to understand. Luanne has become

increasingly open with couples about what she is feeling in the moment, even when the meanings of her feelings are not yet fully understood. She cited Philip Bromberg, who stated that the analyst's affective experience is not his or her own 'private property', but belongs to the intersubjective space they share with the patient.

Rachel Segall then offered several clinical vignettes, each highlighting ways in which she pays attention to and works with her own emotional experience. In one case, she found herself personally identifying with a struggle her couple was undergoing. Relying on her own experience, Rachel was able to usefully model a shift from

"Luanne has become increasingly comfortable playing her cards face up,"... introducing her experience as an essential part of the exploration."

conflict to curiosity to compassion between the partners. In another, she described how she managed to feel her way underneath the brittle, sarcastic surface of one partner's demeanor to reveal deeper vulnerabilities, and how doing so elicited a newfound empathy from the other.

In keeping with the new brunch format, the audience was then asked to serve in the role of discussant. An animated conversation ensued, as attendees engaged around the rich, thought-provoking presentations. One theme that emerged concerned how a therapist should handle the challenging experience of feeling that one partner is emotionally harming or constraining the other, or that both would be better off parting ways. Several attendees expressed thoughts converging around the idea that "love is a mystery," that

we cannot know what 'glue' holds couples together, or how a relationship—even one that appears destructive—might be serving each partner. Justin Newmark proposed that our goal is to maintain what Roy Schafer called 'the analytic attitude,' a spirit of deep curiosity and meaning-making, rather than to make rabbinical decisions. Some felt that Roy Schafer's 'analytic attitude' was too detached to allow for the rich, affective immersion Luanne was describing, and which is now considered by many to be curative.

Another lively debate centered around how and when a therapist should disclose their own emotional experience to the couple. To what degree should we understand our internal experience as private versus public? In her practice, Luanne has become increasingly comfortable "playing her cards face up" as Owen Renik would say, introducing her experience as an essential part of the exploration, even when she is not yet sure what it means. Some in attendance expressed concern about bringing in emotional reactions prematurely or without a clear therapeutic goal.

Steve Krugman served as a worthy moderator for this discussion, framing emerging questions and creating room for a variety of perspectives. Audience members came away with deepened understanding of how the therapist's affective experience can be brought to bear on our work with couples. On June 14th, the brunch committee will continue its focus on affect with a program exploring the experience of shame in couple therapy.



Separation and Divorce

By **Sally Bowie, LICSW**

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When I first began to see couples in earnest, I had no couples who ended their treatment in divorce. I began to feel proud as a peacock, as if that outcome were a measure of my success as a therapist. Then I ran into a spate of couples who did decide to divorce and I was shaken, as if I had failed, as if I were incompetent and perhaps even dangerous. This response of mine confronted me with my own bias. I often say to couples when I begin our work together that I cannot predict the outcome and that it is important to keep the investigation of their dynamics open ended, to enter a state of “not yet known”. But I also say that I have a bias toward exploring every other possibility before arriving at a conclusion of divorce. We are to leave no stone unturned. Since those early days, I have had many treatments end in divorce and many that have not. It wasn’t until preparing to teach a Year II PCFINE class that I was really confronted with the depth of my sorrow when couples, especially couples with children, make the decision to separate or divorce. As Judith Wallerstein has said, “Each divorce is the death of a small society.” It is an act of will, of secondary learning, that I remind myself that divorce can be the very healthiest of outcomes, a true liberation for the partners, a second chance at growth, happiness and love.

In order to understand my own and, perhaps, my patients’ reactions to divorce, I thought I needed to better understand the history of divorce and therefore of marriage. Regulation of divorce was first introduced in the Code of Hammurabi in ancient Babylonia (you know, the eye for an eye guy). From ancient times, marriage has largely been a civil compact, describing function and responsibility and, of course, defining bloodline and inheritance. Most societies have been

patrilineal and therefore marriage established the legal assurance that any children born to the wife were legitimate heirs. The wife was chattel, a legal possession of the husband’s. A husband could divorce his wife for any number of reasons—lack of male heirs, lack of sexual congress, adultery (hers, of course). Greco-Roman times introduced monogamy more broadly to cultured societies. There might be serial marriages, but marriage was between one man and one woman. In early Roman times, marriage was an arrangement agreed upon by families who saw mutual advantage to the match of their respective children. The marriage agreement was simply that, a statement of intention to marry. Similarly, divorce was simply a statement of intention to no longer be married. Neither state nor church was involved in the dissolution of a marriage; however, only men could initiate divorce. Divorce was a civil matter and could be effected by notification. Love or lack of love had very little to do with marriage or divorce. Both were largely functional arrangements.

One of the most significant changes in western society was the introduction of Romantic Love for the upper classes in the Middle Ages, the time of chivalry and knights. Knights swore their allegiance to their fair ladies, performed acts of bravery in tribute but most often never laid a glove on the fair damsels. This was a higher form of love than sexual desire. Troubadours told elaborate stories of love quests. The telling of these stories is coincident with the advent of the novel. So, distance, longing, fantasy, pining, idealization, absence of grounded experience are all the prerequisites of romantic love. This set up has gotten us into trouble ever since because it introduced the fantasied ideal, as opposed to the real.

Gradually, in Judeo-Christian societies, religion began to take a central role in

the business of marriage and divorce. After the fall of Rome in the 700’s, the Catholic Church declared marriage “indissoluble by divorce or death”. By the 12th and 13th centuries, marriages were performed by priests and divorce was prohibited except by annulment or death. Annulments were granted when reasons could be presented as to why the marriage was invalid, such as close blood relation that had heretofore been unknown or undisclosed.

With the Protestant Reformation in the 16th century, secular marriage was once again introduced in non-Catholic countries. In these cultures, love and sex were bound together and seen as respected reasons for marriage. In many countries, marriage was no longer required to be sanctioned by the church and therefore the possibility of divorce was re-opened, although the reasons for divorce still required the designation of “fault”.

In the United States, it wasn’t until the late 1960’s that the designation of no-fault divorce was introduced. New York, in 1989, was the last of the 50 states to institute no fault divorce, simply requiring a declaration asserting the breakdown of the marriage. Incompatibility is an allowable reason for breakdown. If only one of the spouses claims incompatibility, that is enough, as judges will see that in itself as a sign of marital breakdown. Prior to that, adultery—most often the stereotypic detective capturing the adulterous spouse in a compromising position—was the most common reason given for a divorce petition. Other reasons were abandonment, drug addiction, drunkenness and cruelty. Today, 95% of divorces are uncontested because both parties agree to divorce. Divorce petitions increased dramatically in the 1970’s for two significant reasons—one was the no-fault designation and the other was the women’s movement and women’s increased economic independence.

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Currently, in 60 to 70% of cases involving families with children, divorce is initiated by the woman. Among college educated couples, almost 90% are initiated by women. First marriages that end in divorce last on average 8 years. Marriages between people of different faiths are three times more likely to end in divorce. Recent studies show that liberal states have lower divorce rates than conservative states. (Later age at marriage?). Divorce rates began to decline in 2009. The ban on homosexual marriage, until very recently, forced the examination of what a committed union really described: an affective intention or a legal one.

The divorce process entails financial statements, a marital settlement agreement, in the case of children, a parenting plan (parenting time is the new term for visitation), a parenting class attendance certificate (where there are minor children), child support work sheet, a request for trial at which time a judge reviews the agreements and a post trial 6 month waiting period until the divorce is finalized by a Judgment of Divorce signed by the judge.

So now we've arrived at the 21st Century and the question before us, clinically and emotionally, is what does divorce entail and how can we help ourselves and our couples negotiate those troubled waters.

Because we look at couple relationships as dynamic systems, so too we need to look at divorce as the dismantling of a system. All that we've learned "to do", we must now learn "to undo." The most useful parting would be one in which ambivalence can be reclaimed, memories of happier early days be allowed to exist along side the acknowledgment that the happiness did not continue. Again, ideally, each spouse could recognize some of his/her contribution to the dissolution of the marriage. The stages of grief reaction are relevant here. Bowlby's model moves from protest to yearning

to despair and then to reorganization. Kubler-Ross's model moves from denial to anger to bargaining to depression and then to acceptance. One of the most frustrating aspects of working with couples who decide to divorce is that they often stop joint treatment once the decision has been made. We rarely get the opportunity to help couples mourn the loss together. In my own work, I try hard to convince the couple that doing this work will have future rewards for subsequent relationships. Sometimes I am successful and often I am not.

Divorce is a trauma. Again, in his article, "Working Therapeutically with High Conflict Divorce", Avi Shmueli states, "In the list of identified stressful life events, divorce was placed second, being only less significant than the death of a spouse. Separation was ranked third and considered more stressful than imprisonment. It is noteworthy that aspects involving the end of intimate adult relationships occupy the top three places and significantly outrank loss of employment or personal injury in terms of their contributory "scores" toward the link between stress and illness. "Mourning may be embodied and evidenced in accident proneness, alcohol or drug misuse, over or under eating and sleeping, etc. With great regularity, there is psychological regression in the face of psychic trauma. Spouses can become dysfunctionally depressed, rageful and aggressive, numb to engagement with friends, family and the world at large. It is not uncommon for individuals who experience divorce as a survival trauma to regress to stark dichotomies of stance—win or lose, love or hate, victor or victim—rather than a more mature ambivalence. Therapy can be used to slow down the cathartic push for relief of tension, or the impulse to act before one can be acted upon in order to avoid greater pain. Being able to take partial responsibility for marital

break down opens the door for healthy resolution. Remaining in the stuckness of black and white narratives—it's all her fault/it's his fault—defeats it.

Clinically, it is often useful to refer each spouse for individual therapy, if they are not currently engaged in such. Where divorce reawakens a history of past trauma—abuse, abandonment, a sense of being unlovable - the potential psychological regression can be dangerous. A depressed spouse may need medication, external supports from friends and family, or even hospitalization. Where narcissistic injury is acute, a private, safe, containing environment may be necessary. A narcissistically wounded spouse may seek the favor or approval of the therapist as compensation for their lowered sense of self-esteem. Anger can ward off depression but it can also diminish judgment. A rageful spouse will need limits set for the expression of anger. Assurance may need to be exacted that violence will not occur. Sometimes external constraints, such as a restraining order, may need to be in place.

If an agreement can be reached by the couple that discussion of the facts and feelings is of benefit to all, including the children, then parameters are easier to define and enforce. When at all possible, it is important to contain anxiety, lower the heat of accusations and provide a safe place for reflection. Ideally, therapy will slow things down and prevent the chain of impulsive reactions that often precedes separation. If that cannot be achieved, then joint sessions may not be able to continue. It is not unusual to continue the work seeing each partner separately but working toward a common goal of helping the couple to mourn the loss of their marriage. As Whitaker states, "Whatever the future the marriage has, we hope the quality of their relationship will improve."

In at least some, if not many, ways, couples who marry or who are in long
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term relationships begin to atrophy in some designated areas. Some of those areas may be in developmental milestones—independence, autonomy, economic self-sufficiency, competence. Others may be more psychological—identity, psychological growth, amplification of a rich inner life. Division of labor may necessarily promote skill atrophy. A spouse who used to do her own auto repairs now relies on her spouse, or a spouse who used to cook, turns over those responsibilities. In the face of divorce, all those relinquished areas of competence create a sudden sense of vulnerability and risk. Psychologically, issues of dependency are made prominent, leaving one or both spouses feeling helpless and childlike. Marriage can merge the two I's into one We. The very fact of being married can confer a sense of identity and self-esteem. Divorce necessitates the re-establishment of a separate self and that self may be starting from a place of adolescent configuration, a kind of arrested development. Many people married as a way of separating from their families of origin. With divorce, they can feel that they are cast adrift with no family at all. As one's spouse is often the repository of our own projections, when divorce occurs, those projections need to be reintegrated back into the self.

Many people are affected by a divorce. Obviously, the divorcing pair, but also their families and community, as well as the couple and individual therapists who may be treating them. Unlike in a death situation, one's social circle may not gather around in support. People may be confused about loyalties to one spouse or the other, or they may fear the contagion of divorce—if it happened to them, it could happen to me. Present too may be the projection of shame, as if the principal parties would not want the painful event spoken of. But most affected of all, of course, are the children of divorce. Judith Wallerstein, who has done

extensive research on children of divorce, says, "Children of divorce have learned firsthand that relationships can be broken, and they are afraid of being abandoned...Having seen their parents fail, they fear future failures in their parents' and their own lives...Because pre-school children are dependent on parents for their total physical care, they are most afraid of being abandoned...Given their dependence, fears, limited understanding of family events, and inability to comfort themselves, pre-schoolers react strongly to divorce." Of children in the early school years, ages five to eight, she says, "Children this age are likely to be preoccupied with feelings of loss, rejection, guilt, and loyalty conflicts. They are profoundly worried that they will forever lose the parent, usually the father, who has left home. They are especially afraid of being replaced." Of children in the later school years, nine to twelve, she says, "...it is mainly children of this age who formed mischievous alignments with one parent designed to humiliate or harass the other parent...Sometimes they take on very adult roles in relation to the needy parent, a situation that can drain the child emotionally." Of adolescent aged children, she says, "The collapse of the household is especially upsetting for adolescents because they have a strong need for family structure to help them set limits on their own sexual and aggressive impulses. Teenagers are also terrified that they will repeat their parents' failures...It disturbs teenagers to see their parents as people with sexual problems and impulses, just as they themselves are trying to cope with their own emerging sexuality."

Dr. Wallerstein has several suggestions on how parents should tell their children about the decision to divorce: 1) Both parents should tell the children together, 2) Tell all the children together rather than separately, 3) Tell the children only once the decision has been firmly made. She recommends

that "...the divorce is presented as a solution that the parents have come to reluctantly, only after exploring a range of other options. The decision has been made rationally and reached sadly...The expression of sadness is important because it gives children permission to cry and mourn without having to hide their feelings of loss from the adults or from themselves." Children need to know that they are not responsible for the divorce, neither are they able to make their parents reconcile. "...parents should tell the children they are sorry for all the hurt they are causing and should admit in all honesty that things will change. Life will be disorganized, routines disrupted." Children need to be given permission to love both parents and should not be burdened with having to share one parent's anger against the other. Wallerstein says, "The task of absorbing loss is perhaps the single most difficult task imposed by divorce. At its core, the task requires children to overcome the profound sense of rejection, humiliation, unlovability, and powerlessness they feel with the departure of one parent..."

Divorce, unlike death, is always a voluntary decision for at least one of the partners in a marriage...The child understands that divorce is not a natural disaster like an earthquake or tornado; it is caused by the decision of one or both of the parents to separate...(the children's) unhappiness has been caused by the very people charged with their protection and care." Parents need to be mature enough to re-invest their emotional capacities in parenting, as they let go of their investment in being a spouse, a shift from lover to co-parent.

Marriage often bears the weight of romantic dreams. A chance to make up for a troubled or neglected childhood, an escape from dependence, an opportunity to love and be loved, the fantasy that at last someone will really know you, will

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accept you for who you are and will celebrate who you might become, a perfect helpmate, the parent to one's idealized children. It is a unit of civilization and when it fails to live up to the dreams on which it was founded, everyone—from the individuals to their families, to society—suffers. We all want to believe it's possible to have a growing, healthy, comforting, fun marriage. Maybe couple therapists want to believe this most of all. It is hard to feel like one's work has resulted in the rupture of a love founded on hopes and dreams.

There may be the feeling that a different therapist could have done a better job. In many ways, the couple therapist is vulnerable to feeling like the child of a divorcing couple—worried that he or she has caused the rupture, angry that they cannot save the

marriage, protesting or denying the impending loss. Early in the treatment of one couple, the wife was agitated and not sure she wanted to continue the therapy. She said, "I feel like the therapy is poking holes in my marriage." I wondered if I had been a destructive force. Later in the treatment, I brought up this statement and asked how she was feeling about the therapy at that point. She said, "The therapy revealed to me weaknesses in the marriage that I hadn't wanted to know were there."

Judith Wallerstein shines a light on the countertransference feelings evoked when working with the divorcing population. She says, "It is inevitable that the person who comes seeking help, whether bruised or suffering from abandonment and betrayal, who is feeling rejection, loneliness, or even

relief, is experienced by the therapist as a potential double. 'There but for the grace of God go I' is the perception of the therapist in this psychological pas de deux." One can wonder if any relationship is safe, reliable, reasonably predictable.

Carl Bagnini, in his paper "Containing Anxiety with Divorcing Couples" reminds us that, "Our professional competence is shaken by termination due to unanticipated divorce if we are not always prepared for that eventuality, even though we should be because we know that it is not our responsibility to save marriages or to break them up. We simply help couples learn, and they are ultimately responsible for the fate of their relationship."

PCFINE Annual Faculty and Board Dinner

The annual PCFINE dinner for its faculty and board was held on January 25, 2015 at the Tibetan restaurant Rangzen. This dinner is to acknowledge and honor the contributions of PCFINE's faculty, board, and committee chairs. Those attending received updates on the current state of the organization and on plans for the future.

The evening concluded with a video presentation by Joe Shay called "Why Should I Believe You? What Does Trust Have to Do With It?" He showed a number of video clips relating to trust (or lack of it) and led a lively discussion about what would be effective interventions for the couple in each situation.



PCFINE Faculty/Board dinner

Front row: Susan Phillips, Rivka Perlmann, Deborah Wolozin, Susan Abelson.

Second row: Joe Shay, Diane Englund, Ruth Chad, Jerry Gans, David Goldfinger, Stephanie Adler, Roberta Caplan, Alice Rapkin, Linda Camlin.

Third row: Eleanor Counselman, Arnie Cohen, Andrew Compaine,Carolynn Maltas, Risa Weinrit, Justin Newmark, Steve Krugman, Sally Bowie, Betsy Gaskill.

Ongoing Learning Update

The new Ongoing Learning Committee has already generated some real excitement about new opportunities for both teaching and learning for our membership. The first offering, a four week course taught by Carolynn Maltas in January on working with Grown Children and their Families of Origin, has been very successful. And, notes Carolynn, it has been a great deal of fun to teach, with a broad mix of students and faculty involved. In February and March Steve Krugman taught a four week course on using Attachment Theory in Work with Couples. And Eleanor Counselman will be offering a half-day workshop demonstrating a model of Affect-Based Case Consultation in April.

PCFINE also has an on-going writing group, in existence for two years, and led by Roberta Caplan and Jerry Gans. Members who have an idea they would like to explore and write about are welcome to join this friendly, encouraging and helpful group. Anyone interested should contact the Co-Chairs (drccaplan@gmail.com or Jsgans@comcast.net).

Rivka and Carolynn are inviting faculty, students, and the membership at large to think of the Ongoing Learning Program as an opportunity to try out teaching and/or studying something of interest. The Committee will help guide people who are interested in developing educational offerings to move from an idea to a workable format, and the steps to make it happen. PCFINE members are encouraged to try out something new—a reading group, a one-time workshop, a longer course, with size, location, time etc. to be decided by the teacher.

One idea currently being developed by two former students is a case-conference to be organized by them, in conjunction with one faculty member who would provide continuity and coordination, and use rotating

PCFINE Board Retreat



Photos from the March 8, 2015 Board retreat.

Thanks to our photographers Justin Newmark and Dan Schacht; each took one of the photos and therefore was not in that picture. We wanted to include everyone, and lacking Photoshop skills, are publishing both pictures.

Photo 1: Front row: Sally Bowie, Justin Newmark, Alice Rapkin, Susan Phillips, Rivka Perlmann. Back row: Steve Krugman, Eleanor Counselman, David Goldfinger, Carolynn Maltas, Mary Kiely.

Photo 2: Front row: Dan Schacht, Sally Bowie, Alice Rapkin, Susan Phillips, Rivka Perlmann. Back row: Steve Krugman, Eleanor Counselman, David Goldfinger, Carolynn Maltas, Mary Kiely.

faculty to address specific cases or topics.

As PCFINE grows, this program represents an important step in offering more learning and teaching experiences for the membership.

If you are interested in developing an Ongoing Learning project, please contact Carolynn (carolynnmalta@gmail.com) or Rivka (rivkayp7@gmail.com)

Member News

■ **Alan Albert**—I have a book of poems coming out at the end of 2015, entitled *Fragments of the Natural*. It will be published by WordTech Communications in Cincinnati, Ohio.

■ **Sally Bowie**—I'm married to a psychoanalyst, a former President of BPSI—and a member of PCFINE. At BPSI social gatherings, I'd be asked what I did and I'd explain that I was a social worker, a psychotherapist with a specialization in work with couples. The most common reaction was one of recoil. Too hard, too confusing, "I would never see couples", not the treatment of choice. I've subsequently learned that some analysts do see couples but most have had no training in couples work. So I decided that it might be worthwhile to investigate the interface between PCFINE and BPSI a bit. On May 4, at the Members' Seminar, we will hold a joint panel to discuss the rewards and challenges of working with couples. I will moderate while **Carolynn Maltas** and **Justin Newmark** will represent PCFINE and Steven Cooper, who does see couples and loves the work, and **Holly Housman**, who is a member of both BPSI and PCFINE, will represent BPSI. It should be a lively evening. It is unclear at this writing whether the seminar is open to BPSI members only or to the clinical community at large.

■ **Roberta Caplan**—I published a paper recently, entitled "Supervising the Intern Who Inherits a Case: Making the Most of the Change," in *The Clinical Supervisor*, Vol. 33(2), 2014. It was brought to fruition in the PCFINE writing group whose members are in the acknowledgments. New members are always welcome in this friendly, supportive and no-pressure gathering!

■ **Eleanor Counselman**—In November I represented AGPA at the Rosalynn Carter Mental Health Symposium in Atlanta, Georgia. This annual mental health policy conference is attended by representatives of mental health organizations, policy makers, and consumers. I learned a lot, especially about the implications of

the Affordable Care Act for mental health care. I also presented a workshop on "Affect in Supervision" and chaired an open session on "Group Psychotherapy of the Future" at the AGPA Annual Meeting in San Francisco in February. On April 10th I will offer a workshop for PCFINE on Affect-Based Case Consultation.

■ **Jerry Gans**—I presented a talk at the Harvard Medical School course on Treating Couples (Nov 7-8, 2014) on "The Do's and Don'ts of Couple Therapy." In December I taught the module on Therapeutic Action for the PCFINE trainees and presented a Grand Rounds at the Boston Institute for Psychotherapy on "The Role of Personal Experience in the Making of a Group Therapist." In January I presented a workshop at Harborside Counseling in Newburyport on the Do's and Don'ts of Couple Therapy. At AGPA's Annual Meeting in February, I led a two day Institute for senior therapists and was a panelist on an Open Session on "The Use of Self in Group Therapy." In March I was a panelist on PCFINE's March conference on "Couples on Fire". Finally, in April, the *International Journal of Group Psychotherapy* will publish my article on "The Insufficiency of Theory: Gaining One's Voice in Group"

■ **Barbara Kellman**—I have two recommendations. Check out a book called *The Summer House* by Alice Thomas Ellis (make sure you have the right author—at least one other book has same name). It is a trilogy—each section told from the perspective of a different woman over a two week period in the 1960's outside of London. All three have a history with an expatriate community in Egypt. Oh how the world has changed since 2001! It is not a light read, but the language is beautiful and it raises the ever present question of how three people can perceive the same events very differently. Also challenging questions about the roles of women

(and men), pre-feminism and the role of the Catholic church in the lives of women. And then, if you haven't seen *"Finding Vivian Maier,"* an Oscar-nominated documentary by John Maloof and Charlie Siskel (nephew of the critic) about a mysterious woman photographer out of Chicago, I recommend it. Won't tell you more except that if you like 20th century photography and are intrigued by the idea of watching the uncovering of a life without being able to talk to the subject, see this movie!!

■ **Carolynn Maltas**—I just spent a week at a language school in Oaxaca, Mexico, soaking up the culture and wondering why I live in New England in the winter. I presented a talk in the fall to the Boundless Way Zen membership on "Countertransference issues that arise counseling relationships."

■ **Jacquie Olds**—I was interviewed for the *Harvard Gazette* on seasonal depression on Feb 24, 2015.

■ **Ken Reich**—In November 2014, I taught a workshop entitled "Hope and Hopelessness in a Couple Treatment Shadowed by Death" for the Rhode Island Association for Psychoanalytic Psychotherapy. Providence, R.I. In December I presented "Hope and Hopelessness is a Analytic Couple Treatment," at the Psychoanalytic Educational Forum of Boston. I also taught an eight week elective course, "A Psychoanalytic Approach to Understanding Change in Couple Therapy," at the Boston Psychoanalytic Society and Institute. In April I will give a lecture called "Death and Hope in a Couple" at the International Psychotherapy Institute, International Association for Couple and Family Psychoanalysis, in Chevy Chase, MD.

■ **Daniel and BethAnn Schacht**—We are thrilled to announce the adoption of our son Leo—born on October 27th. He is already busy teaching us and his sister Avery about sibling and larger family dynamics!

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Cartoon Caption Contest



Cartoon by David Goldfinger

We are pleased to introduce a new feature to our newsletter: A Cartoon Caption Contest. Submissions for this cartoon should be sent to David Goldfinger at davidagoldfinger@gmail.com. All entries received within the first 14 days after publication of this newsletter will be posted on the PCFINE listserv at the end of that time so that the PCFINE community may delight in one another's cleverness. The next issue of The PCFINE Connection newsletter will announce the winning entries as selected by the newsletter staff based on the creativity, humor and originality of the submissions. Have fun, be creative and enjoy!

Member News

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■ **Libby Shapiro**—Jerry Gans and I were on a panel called “Uses of the Self in Group Leadership” at the American Group Psychotherapy Association Annual Meeting in San Francisco in February.

■ **Joe Shay**—(who forgot to submit last time) I was the keynote presenter at the Carolina Group Psychotherapy Society where I presented “Projective Identification Goes to the Movies.” I also led the second year of a two-year Experience Group at the NSGP Annual Conference last June, and at the same conference led a workshop entitled “Couples Gone Wild: The Top 10 Complications in Couples Therapy.” In the fall, I presented “I Just Want to Teach the Group’: Does Group Process Really Matter?” to the faculty

of MIP. Recently, I presented “Why Should I Believe You? What Does Trust Have to Do With It?” at the annual PCFINE Faculty/Board dinner, followed by “Mapping Theory to Technique” at the AGPA Annual Meeting in San Francisco. I then chaired a conference entitled “Couples on Fire” featuring nine of our august PCFINE faculty members. Also, I led a weekend group for Maine clinicians who have been meeting together for more than 25 years now, and then was a panelist in an AGPA teleconference in which I discussed a paper on Solitude published by a senior AGPA member.

Letter from the Co-Presidents

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indebted to them for their extraordinary efforts.

- 6) As of this writing, upcoming events include a Brunch on March 1, Therapists’ Use of Their Own Affective Experience in Couples Work; the first ever PCFINE Board retreat on March 8, the main foci of which will be whether to retain or change the PCFINE name and to explore the structures that ensure the organization’s existence and transparency; a morning conference, March 21, 2015, Couples on Fire: What Should I Say and Why Should I Say It?”, with three panels of PCFINE faculty discussing three different film clips of couples in trouble; and on March 22, there will be a memorial gathering for our beloved PCFINE founder, faculty and Board member, Gerry Stechler, Ph.D.

I hope all of you will continue to feel that your involvement in PCFINE is something of value, and that, when and if you have the time and energy, you will find a way to get more involved. There are many ways for this to happen—just get in touch with us and we’ll try to make it possible.

Don’t forget to keep your back straight and bend your knees when shoveling. And remember, Spring is around the corner (maybe way around, but still...).

Sally (and Justin)

Sally Bowie, LICSW

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&

Justin Newmark, Ph.D.

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Co-Presidents, PCFINE